Natural Gas Well Completion Two Day Notification

E-mail to: <u>DEPOilandGasSector@wv.gov</u>

New Source Performance Standards for Crude Oil and Natural Gas Production,
Transmission and Distribution "NSPS 0000"

Division of Air Quality ID Number (If Available)

SECTION I: GENERAL INFORMATION

[Add rows to the table for additional wells, as necessary]

CONSOL ENERGY
Owner or Operator Name

ONE ENERGY	DRIVE			
Street Address	Water Committee			
JANE LEW	WV		26378	
City	State		ZIP Code	
STEVE SPITLE	R stevens	spitler@consolenergy.com	304-406-8478	
Facility Local Contact	Name E-Mail		Telephone Number	
Stewer St	ritles	11/4/13		
Signature		Date		**************************************
	JRCE DESCRIPTION			
1. Please check tr	ne proposed well flowba	ck compliance option:		
	ck gas to a completion on the well or another well	combustion device Use on-site as a fuel source; Route flowback gas to a salable gas pipeline		
		ich affected source per §6	0.5365.	
API Number	Farm Name and Well Number	Latitude & Longitude Coordinates (NAD83, Decimal Degrees to 5 digits)	Planned date of the beginning of "Flowback"	Anticipated date of well completion
4709703847	RUSSELL HELTON, CENT3A	N.390324.29800 (NAD83 WVN) W:801106.56700 (NAD 83 wvn)	12/2/13	11/25/13